

Makale 4-6 Temmuz yapılan Asian Conference for Emergency Medicine 2011 kongresinde poster olarak sunulmuştur.

29-year-old male patient was brought to the ED after falling a 10 kg of wood to his low back area. When he arrived his vital findings were arterial blood pressure: 90/50 mm Hg, heart rate 104 per minute, breathing count 22/min, oxygen saturation: 88%. His physical examination revealed a Glasgow Coma Scale score of 13 (E4M5V4), paraplegic and had a 0.5 cm skin incision at the midline of thoracolumbar region and tenderness at the spinous process of L1 vertebrae. At the patient's left lung breath sounds were decreased and subcutaneous crepitation was determined.

Then 16 G venous antecubital pathway was opened and 2000 mL saline solution and oxygen 6 L / min was started. Free fluid was seen in the patient's splenorenal range at bedside ultrasonography. First Lumbar vertebrae (L1) burst fracture was revealed at the patient's thoracolumbar x-ray. Whereupon CT scan showed rib fracture, minimal hemothorax at the left hemithorax, laceration at the spleen, burst fracture at L1 vertebrae and air in the spinal canal (Figure 1).

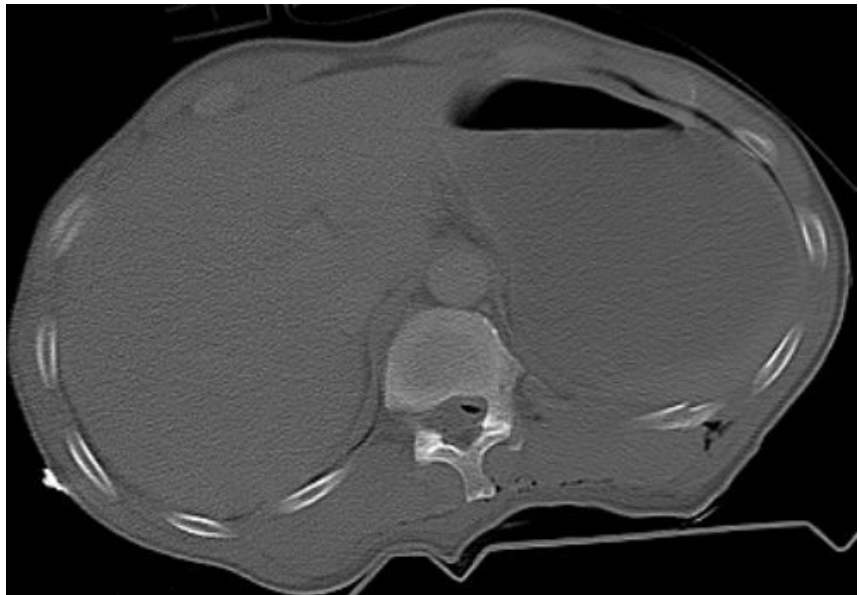


Figure 1. Air in the spinal canal = Pneumorrhachi.